

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.  
10/596246  
APPLICATION

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3	2			/		
4	0			/		
5	0			/		
6	0			/		
7				/		
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10				/		
11				/		
12				/		
13				/		
14	0			/		
15	0			/		
16	0			/		
17	0			/		
18	/		/			
19	/		/			
20	/		/			
21	3			/		
22	0			/		
23	0			/		
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TOTAL IND.			2			
TOTAL DEP.			28			
TOTAL CLAIMS			30			

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

BEST AVAILABLE COPY